

The Developmental Services Quality Council provides leadership for consistent, systemic Review and improvement of the developmental disability and acquired brain disorder Services provided within New Hampshire's developmental services system.

DEVELOPMENTAL SERVICES QUALITY COUNCIL MINUTES

Wednesday, November 28th, 2018, *

Present: Kaarla Weston, Lisa Beaudoin, Isadora Rodriguez Legendre, Deb Orman, John Richards, Mary St Jacques, Emily Manire, Adrienne Evans, Jonathon Routhier, Sarah Aiken, Cathy Spinney

On Phone: Deb Opramolla, Karen Blake, Ken Ferreira

Approve September minutes

Mary motioned to approve the minutes, Emily seconded, all in favor. Minutes approved.

Update NH Quality Framework Grant (Mary)

There have been a lot of training areas identified and they are adding them to the quality frame work grant. There have been more grants put out nationally, this will help show the work that we have done in NH nationally.

ABLE – There was a group that met to create some questions around core values and respect to be included with the DSP survey being generated. Hoping the money spent will give tangible results to the quality and services.

Question: were DSP's and individuals included on the formation of the questions.

Answer: the DD Council is working with People first to do listening sessions with the People first chapters. There will also be forums with families, individuals, and DSPs.

Other ideas:

Want to be sure to include DSP's that works for self-directed families. This includes IHS and PDMS, the AA will have a person responsible for each of these that could assist with sharing the information.

How will we ensure it goes to the staff in the vendors? It will get to vendors but how do we ensure it goes down to the DSP. It can be difficult to tell private corporations (vendors) to do something like put out a survey.

Is there a roll of the Family Support Councils? Information will be shared with the State FS Council

Are there meetings already happening that we can take part in vs creating a new meeting.

Request: the survey group will provide a plan to the Quality council on distribution of the survey.

Corrective Action Plan update – (Kaarla, BDS):

Kaarla gave a background on the corrective action plan and how it occurred.

There is a work plan that has been accepted by CMS that also includes

1. separating case management from services (conflict free) and
2. Allowing vendors or anyone that receives Medicaid to bill directly if they meet the criteria.

The information is available on the website and it is updated consistently.

All 10 Area Agencies were asked to submit a high-level plan for how they will comply with conflict of interest. These are being reviewed.

Request: The plans are not currently on the website – The quality council would like to ask that these plans become public information and posted on the website. At minimum we would like a summary of the plans.

If the plans are not public could someone present – would this be more of a CSNI presentation or BDS presentation.

Some AA are conflict free, some are close, and some have always done both service coordination and been the vendor.

There will be a stakeholder meeting happening soon.

There have been some subcommittees formed out of the Stakeholder Advisory Group. Kaarla gave an update on each subgroups.

There are three new Liaisons at BDS : Jessica Gordon, Karen McGloughlin, and Abby Conger

Request from Last meeting regarding out of state placements – recommended to invite Laurie Vaschon to a meeting do a brief presentation on this.

Sub-Committee Reports

Transparency – (Adrienne) met today moving forward with training for families and service coordinators – a basic over view of the system and services.

Workforce Training – (Lisa B) – - Lisa , Deb , Deb, Cathy are now on the committee.

Rules Review & Recommendations – (Stephanie) There are rules and regulations coming up for 2019. Family Support Regulations will be heard in February. PDMS will be coming up as well. Next committee meeting is December 12th at 12:30. DRC wants feedback from various stakeholder groups to inform this process.

Concerns around HIPPA when families want support. How can families support each other. CB has a process where some FS Council members have gone through HIPPA training and can access information within the walls of the area agency. It is based on policy and procedure for volunteers within an area agency.

Sarah to share the process of how CB has created a process to allow FS Councils to support families while following HIPPA recommendations.

Stephanie will put together an outline of what feedback is needed and share with the group.

The rules and regulations committee wanted to follow up on having a conflict of interest subcommittee. Members of the Subcommittee: Lisa, Mary, Emily, Stephanie, Jonathon, Sarah, Kaarla, Deb Opramolla,

What is the QC role, responsibility? History

The exec committee met. They talked about the strategic plan.

Review of the basics of the quality council – hopefully this will lead us to a place of reminding and understanding us all our purpose and what the QC was legislated to do. The Council was established in 2007 out of SB 138. SB138 did a few things but we will focus on the QC Section

From 171: A The council shall regularly review information on the quality of developmental services in New Hampshire and make recommendations for improving service quality and the quality assurance and continuous improvement systems, including but not limited to:

- (a) Standards of quality and performance expected of area agencies and provider agencies.
- (b) Types of data to be collected, analyzed, and disseminated to determine whether standards are being met.
- (c) Quality assurance and oversight mechanisms to be used to gather data and information.
- (d) Content, frequency, and recipients of quality evaluation and improvement reports.
- (e) Expectations and procedures for following up on identified areas where improvements are needed.
- (f) Structures, policies, rules, and practices, including staffing or organizational changes, to ensure that the developmental services system works as intended in RSA 171-A:1, including:
 - (1) Ways of supporting values-based and person-centered service planning and provision, as well as problem solving, innovation, and learning;
 - (2) Recognizing and disseminating what is working well (best/model practices); and
 - (3) Reviewing, interpreting, and disseminating data and information on a regular basis to bring about transparency for all stakeholders and the public.

IV. The council shall make an annual report beginning on November 1, 2010 that includes its recommendations and an assessment of the actions taken in response to previous recommendations to the governor, the speaker of the house of representatives, the president of the senate, the members of the house committee on health, human services and elderly affairs and the members of the senate committee on health and human services.

V. The meetings shall be convened by the commissioner of the department of health and human services, or designee, and shall meet regularly as determined by the council. The meetings shall be open to the public and subject to the provisions of RSA 91-A, the right-

to-know law. The council may establish bylaws for governing its meetings, decisions, and other operations.

There are good bones to what we are currently do and take these pieces to what we do to make decisions.

In Kaarla's new position she has parts about quality and she thought of other things that should be shared with the Quality Council. We should acknowledge the work and pieces that the Quality council has touched and supported over the years.

What do we want to do? Find consensus, guiding principles.

Review of abridged guiding principles.

This document outlines what some members think the council should be looking.

How do we look at complaints and a service and quality issue?

Do we look at quality in a broad sense? Quality is subjective depending on who is looking at it and through what frame. What is relevant and timely given the circumstances and timing. Part of our job is to ensure we have quality measures that represent all of those.

This document outlines what some members think the council should be looking.

This gives up focus on where the QC should be looking at.

Do we look at quality in a broad sense? Quality is subjective depending on who is looking at it and through what frame. What is relevant and timely given the circumstances and timing. Part of our job is to ensure we have quality measures that represent all of those.

Updates are helpful but how do we give feedback to the updates to have more impact. Skimming the document only person centered is only mentioned once.

We got more input done when we met more frequently. When two months goes by it can impact our continuity. We have also gotten less frequent on output of letters and recommendations that are sent out by the QC. It is frustrating that decision makers do not seem to not know who we are. We are doing great work and how do we connect this to more meaningful output. We can make that happen, we have the right people in this room to make it happen, so that the QC is involved and engaged with decisions. QC used to meet with HHS oversight – we could go back to meeting quarterly and giving them a 15-minute update. The QC can also share what our member organizations are doing and disseminate information. We need to do a better job communicating the data to justify the funds supporting individuals will be well spent. Things are happening really quickly how do we respond that? We have been in the monitoring mode – how do we get back to the focus areas and mobilize around that. All of the quality information is there, but how do we make it useful. There are a lot of components of this information and data that are tracked. We need to hear about what is being done and how can the QC empower those gathering data and how can we support them in the data tracking. We used to have a set of values that came from BDS and it filtered down to vendors and it gave us a basis for what values those working with individuals are trained in. There are also staffing issues. Not just a warm body – someone that is interested in what they are doing.

Could we do a quick presentation at the legislature every two years to let them know about the QC. There are some reports, whitepapers, and recommendations that have been written in the past and many are relevant.

Communication – regular column in the NH challenge or other publications from the QC

Strategic Planning identifying each calendar/fiscal year 3 – 5 things we are working on for that year. This may help us to stay focused. Look at the rule for 51% of family member and how does that count are people counted twice in their roles.

Value based service coordination and services – this is the hardest thing to discuss what service coordination will look like as we come into compliance with the CAP. The NCI questions have been added that allow for BDS and AA if there is an unmet need, not just at the level of abuse and exploitation.

Request: Quality Council would like to ask that the Area Agencies Summaries at a glance – annual file review be shared with the QC. It would not take a lot of time to review.
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Looking to strategic plan - is there a dash board we could create for us to review to help us focus. There is a lot of data and want to ensure that information is used to help us focus and that people are aware that the information is being shared with the QC. Want to be sure that the family perspective is shared in the process as possible. Want to get as much data as we can but want to be able to use it to focus. How do we look at complaints (such as no call back) that do not get to the level of a complaint? This is a service concern and how do we address these.

The onboarding process takes 3 – 5 months –antidotal information how do we speed that up so when we do find someone to full position we can keep. In general, it takes too long for us to onboard. This impacts if there is a lapse of funding - how do ensure we are using our funding as it was intended in the time period

It is up to the Quality Council to identify the issues, not our responsibility to solve the problems. We can make the recommendations but are not required to solve all the problems.

We do want to be cautious about moving forward with these antidotal stories we want to be taken seriously so we need to be sure we are backing these up with data. How can we take antidotal stories to support the data?

Strategic plan

We have been talking about a strategic plan for a while. The exec committee updated it and each of them sent it two people. They did receive one response. Does it have to be a consulting firm. Could it be someone that is retired from the system or someone that could facilitate a meeting.

Jenn will share the RFP so everyone can share it with their contacts.

Possible Staff Position for Quality Council

The QC has been asking the department to fund a staff position since its inception. They do provide admin support. The CYCC had a part-time paid ED position. The department has decided to create a full-time position that will be administrative position to support the QC, ASD, CYCC. There has not been a job description yet, and to be clear it is administrative in nature. This will likely be a July 1 start date.

Legislative Update (Sarah)

There are only LSR's available now. For the first time we have a republican governor and a democratic house and senate. Coalition of folks that are meeting around a rate increase of any Medicaid billable service (with the exception of hospitals).

Old/New Other/Announcements/Public Comment

Tomorrow is DRC 40th anniversary celebration Thursday 530-8 at the Grappone. PPN is also looking at strategic planning and looking at how do we better utilize partnership

PPN will also be doing a social media framework.

DDC winter awards ceremony December 13th– at the Grappone center 11am – 2pm
CSNI and ABLE are doing a rally to fully fund the waitlist next Wednesday from 11:30 – 2:00. Talking points to say thank you. Also wanted to clarify that not all 10 area agencies are participating.

Next Meeting: Wednesday, January 16, 2019 from 10:00AM – 1:00PM

The Developmental Services Quality Council provides leadership for consistent, systemic Review and improvement of the developmental disability and acquired brain disorder Services provided within New Hampshire's developmental services system.

DEVELOPMENTAL SERVICES QUALITY COUNCIL MINUTES

Wednesday, June 20, 2018

Members in Attendance: Emily Manire, Kaarla Weston, Mary St. Jacques, Karen Blake Mosman, Isadora Rodriguez-Legendre, John Richards, Stephanie Patrick, Jonathan Routhier, Cathy Spinney, Sarah Aiken, Lisa Beaudoin, Tammy Mills, Jim Piet
Members of the Public: Heather (Donnell) Young and Jennifer Pineo NH Family Voices Admin Support.

Approve May minutes

Jonathan motioned to approve minutes with correction, Sarah seconded. All in favor with John Richards abstaining. Motion passed.

Sub-Committee Reports

- Transparency – (Sarah)
Currently working on an initiative of creating centrally located place, possibly website to put policies and information all in one place. Starting with information that is easily available. This information is hard to keep updated but it is important information for families to have. The committee has asked for a flow chart of the chain of command, noting it does not need to have names but could have job titles for how a family would work through a process. Purpose is to create a transparent process for families to get information in one place instead of multiple places but also do not want something that will need to be updated so often that it will be difficult to keep it updated.
This is also something the IOD Grant could support
- Workforce Training – (Lisa B)
No Update - Needs new members
- Rules Review & Recommendations – (Stephanie)
Recommendations were given at the last meeting. There do not seem to be a lot of changes needed so it may just be discussed in the committee and not the full QC meeting. Looking to have some questions for BDS (Kaarla) regarding Conflict Free and get responses and then have the responses from BDS to look at some things that case management would need to have across the board
- Strategic planning committee - working on setting up a meeting date in a few weeks.

Corrective Action Plan update – (Karla, BDS)

Provider selection (previously referred to as RFP process) – it was noted that each agency uses different RFP forms has a different process. The subcommittee looked at all the different forms and the information that was needed and came up with a recommendation of a form to use that will hopefully work across the system. There will be two different

forms one to send out and one to receive responses. NH hospital also had some thoughts the RFP process upon discharge. What happens with AA is the provider of last resort and there is no vendor available. CMS has given a guideline for a percentage of when a conflict may occur (as it may happen at times)

DRC is working on issues around supporting individuals that could have a more independent situation, but it is hard to advocate for that when they cannot get a response to an RFP.

There are four homes opening:

1. for individuals with arson behaviors
2. emergency housing so if someone needs to be moved from a home for some reason
3. for individuals with dual diagnosis
4. for women that have behavioral needs.

Some are 60-90 day and 2-3 year stabilization homes. This is to also to support individuals that may be sent out of state for housing and supports to build capacity in the state. These homes were created based on needs of the individuals. There is a group at CSNI looking at the services to ensure there are supports.

Rural exemptions – looking as this using NCI data. In other states CMS has approved the zip code exemptions so they will look at this. It cannot be a standalone. Needs to look at how many people are served and what is the vendor capacity. The exemptions in other states has been in other areas besides the Conflict of Interest.

Chris Santaniello has reached out with all the AA directors and asked each for regional plan on how they will come into compliance. She has given the option to meet with boards and AA directors.

All 525's are exempt. They will be looking at sharing this information with families as an option. Feedback from families is with day programs there is a concern that if someone calls in sick there is a back up, but there is not in 525 programs. It is a capacity issue. If there are complex needs it is difficult to find staff. In the past each agency had different paperwork and there now appears to be a movement to have similar pw across the state. There are concerns about work force. Pay is low and when you look at housing information it is not possible for someone to work at this pay level and afford a housing.

The bureau has 2 RFPs – one is for a system that will bring in all the data and information into one place. <https://www.dhhs.nh.gov/business/rfp/index.htm#bds>

Todd Ringelstein has retired, and they are on second round of interviews and they are not sure if it will go outside of BDS, but encourage anyone that is interested to apply if it goes public.

Is their capacity building around individuals who need ITS and looking at it at an earlier age. Some of the individuals that are turning 21 who are served at residential placements. These individuals are prioritized at an early age to receive residential supports. There is a need for greater effort to support the needs individuals that are often given constant 1:1 support, eyes on, and often hands on when there is a behavior. BDS did provide a day long trauma informed care presentation. There has been building momentum on life course trajectory.

Update NH Quality Framework Grant (Mary)

Committee continues to move forward with its work. They met with HRSI – both the internal group and the stakeholder group. Choice around service and provider selection was brought up as well. People may not have the information to make an informed choice around what the best program and supports are best for the individual. If that conversation is only once a year how is that a choice? This is not just a once a year conversation there are quarterly check ins and other conversations and the yearly meeting is to put it down on paper. Are families just given information that the case manager thinks is the best options, and that does not promote options. Example was given that if you are in a town that you are not familiar with how to you pick the restaurant? You would want someone to give you the best recommendations. This process is individual to the family and the needs and wants of the family and individual. Some want all the information, some want a smaller list of recommendations. Is there a way to create a score card for vendors to support families and individuals in making a choice? This would have information such as how many people are served, where they are served. Somethings are objective. One person may love it one person may hate it.

There is a draft tool for life course trajectory tool as part of the quality frame work around quality indicators that HRSI is editing. Mary will send this in advance of our next meeting for our feedback. This tool would be good for the QC strategic planning. Who will administer this? At the beginning of the process so it is a way to look at information we already collect in silos and pull it into one place. Could SALT look at this with People first as well to give feedback. Jan Skoby was at the meeting, so SALT and people first could ask and her for more information. At the beginning of the process once they have a better idea for how they will use this tool they will be reaching out to the appropriate groups. DDC and CSNI are looking at doing focus groups to look at what is quality and how to best implement this tool. There are a lot of moving parts for this grant so working on keeping it all moving forward.

Discuss ideas for Legislation around funding for the QC's work and for Workforce Training programs – (Sarah)

The current law lists some organizations that do not exist, such as the Autism Society. We would need to find a sponsor. It is just a technical change.

Discussion: Do we want to ask the Department for a recommendation to put funding for the council in their budget? Or put in a separate legislation on our own for funding for the QC? Do we want to move forward with this in this budget session? If we want to have the conversation about what we need for funding and what it would look like.

Would we be better to look at work force training issues? Could we have a training coordinator and executive director? What is the point of funding? Example if we had to do a strategic planning we had to rely on donations from members to pay for this.

Admin support is a small amount that is supported. There is another council that is similar that is funded at around \$80,000 a year. Not envisioning an executive director more of administrative support.

We do not have one place in our system that pulls together data to look at the system as a whole. We have reports that are done that look at pieces.

Want to be mindful of negative consequences. Want to be able to back up why it is important to have this position. Thoughts around \$30,000 to have a position and funds for projects. Would have to look at this. Would it make sense for the strategic planning committee to look at this to decide if they want to have legislation and to create proposals for costs. If you want legislation you would need to look it for January. Or could ask for it to be added to the BDS budget and would need to talk to Chris Santaniello. Need to have a really clear idea of what the person would be doing and to have a clear proposal for what this person will do. We need to start with the strategic planning and go from there.

Question around loan forgiveness around work force? Liz Collins was meeting with the legislators for loan forgiveness for nurses. Each of the AA got \$2000 for infrastructure needs. A substantial amount of funding (\$82K) was made available for support workforce training and college courses. Could there be legislation to help with the work force training. It may be difficult to do when there is currently funds that are not being used.

Legislative Wrap-up (Sarah)

HB1816 has been enrolled on May 23rd. It goes into effect 60 days after passage. Governor has until July 22nd to sign off on it. Likely to be signed next week. SB 590 was enrolled May 23rd. It has a July 1 start date.

Old/New Other/Announcements/Public Comment

We need to resurrect the bylaws committee to review them. Some questions about if the alternates can vote. This would be a short-term subcommittee. Had an orientation meeting this morning. Sarah will pull the binders together for everyone. Can this be done electronically? It will be placed on e-studio as well.

Next meeting is the annual meeting. Please let Jenn know if you have any nominations. If you nominate someone please check with them prior to the nomination.

Cathy will not be running for chair again, so this position will need to be filled. If you have identified an alternate, please give Jenn their contact information. Also, please note it is your responsibility to let the alternate know if you will not be attending, but let Jenn know when the alternate is attending

Announcements

DRC has hired two new positions

Deodonne Bhattarai, Communications Specialist
Ellen VanGelder, Institutional Rights Monitor

DRC will be looking for input on their priorities from the community.

DRC will also be doing a survey of people running for office of Governor and US Congressional Candidates. Will not be surveying the State of NH reps because of the sheer numbers. Every polling location in the federal election has an accessible voting machine. Anyone can use it.

PPN is working on a video around DSP and the work they do? It will be used to speak to legislatures to look at importance of work and liveable wages.

Next Meeting: Wednesday, September 19, 2018 from 10:00AM – 1:00PM

This is our Annual Meeting with election of officers

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DEVELOPMENTAL SERVICES QUALITY COUNCIL

MINUTES

Wednesday, May 16th, 2018, 10AM – 1PM*

In Attendance: Jonathan Routhier, Adrienne Evans, Kaarla Weston, Jason Smith, Linda Bimbo. Ken Ferreira, Sarah Aiken, Jim Piet, Isadora Rodriquez-Legendre, Stephanie Patrick, Cathy Spinney, Emily Manire, Karen Blake Mosman, Deb Opramolla,
Members of the Public: Heather Donnell, Eddie, Jenn Pineo Admin Support

Approve March minutes

Ken motioned to approve March minutes, Sarah seconded. Deb and Jason abstained. All in favor. Minutes approved.

Corrective Action Plan update – (Karla, BDS);

See Attached Letter

NH has been given a date of 8/31/2021 to comply. This coincides with when the next waivers are due. There are specific activities the department will have to do and they are working on that.

Chris had thoughtful conversations with CMS. The next stakeholder meeting is June 21st 1-3pm in the Chapel. There will be several subcommittees. There is a lot of work happening in the provider selection committee (formally the RFP committee). Trying to address the capacity issues in some parts of the state.

Question on why lack of providers - is it a rate issue or a staffing issue. Both issues are contributing to the capacity issue. CSNI is collecting information on the staffing across the agency.

Comment: DRC is hearing there are issues around selecting independent case managers. There are some concerns around the amount of time it has taken to set this up.

Sandy Hunt did meet with Region 8, they are realizing their needs to be more things in writing and for the independent case management and what and Area Agency case management is expected to do because there are differences and that gap needs to be filled. There are more discussions that need to happen and there will be some time spent on this while they come into compliance. There are concerns in how long the contract is taking to put into place, it would be suggested they go up the chain of command.

Todd Ringelstein is retiring from the state on May 31st.

Question: is there a commitment from the department to augment staff to support the CAP? Laurie Vashon has been hired as an Admin II and will be taking over Denise Sleepers position and will support as well.

Question: Is there a timeline for the direct billing of the corrective action plan? Jen Doyt is the lead on this and will have a subcommittee working on this.

Question and Answer for strategic plan proposal

Gerry King presented on her process for strategic planning and answered questions from the group. The other proposals have withdrawn at this time.

Motion made to not proceed with contract today. John motioned, Isadora Seconded Isadora, all in favor. Motion passed.

Deb commented it is important to do this. Jim agreed.

The strategic plan asked for:

- Plan and facilitate a half-day kick-off planning meeting of the Quality Council.
- Facilitate up to 4 meetings with an ad-hoc Steering Committee to identify action steps to support the work identified by the full group at the kick-off meeting.
- Draft a written work plan that identifies specific action steps for the Council and its committees.
- Present the draft plan to the Quality Council for review and approval.
- Coordinate the work with the Quality Council Chair throughout the process.

What does the Quality Council want to get out of the strategic planning?

Some people have said they are not clear on their roles, should we first get some clarity on that before we move forward with strategic planning as a two-step process.

Can we have a subcommittee look at figure out what we need to do as a council to get everyone up to speed and define our role. At this meeting refocus on the charter and look at what we have done.

Members on the Strategic Planning Exploratory committee.

Sarah, KB, Ken, Emily, Deb, Isadora, Johnathan, and Stephanie. Sarah will bring the group together.

Zoom – CSNI will help set up zoom.

Once this is nailed down do we recraft an RFP.

Proposal to meet in June 20th and cancel the July meeting. Meeting will be at community Bridges.

Review of Rule 1001 & 522

See attachments below

Motion to send a letter Sarah motioned, KB Seconded. All in favor. Stephanie will send in letter form to Cathy.

Would like time on the September meeting to discuss Conflict of Interest, this subcommittee would have questions ready for Kaarla (the Department) to answer at the next meeting. The committee would like at least 45 minutes to discuss.

Update NH Quality Framework Grant (Mary)

The quality grant right now is on DSP training. CSNI and DDC are very actively involved in this process. At the last meeting they looked at the DSP training requirements. AA currently use Relias for

The individuals under PDMS/525 had a more limited training and there was a need for more training.

Question: Is there a way in training to have the DSP title relay how much training the DSP has.

We need to understand what the state and federal training is required. We need to understand the concerns of families, is it they do not want the training to be done or they do not want it out of their budget.

There is good info in the online courses. Are there other ways we can look at this and how to support the PDMS/525 families within this training process?

There is no one training method that will serve everyone. Online training can be a good baseline. Often the best training comes from someone that knows the individual and that is often the family. Could there be a meaningful mentoring program for DSP and how do we fund that?

How do we create a career ladder for DSP's.

There was a survey that was done in 2015 – 2016 and they would like to repeat the survey.

Jenn will look for the meeting minutes and send to Linda about the survey when it was presented to the Quality Council

Update on Vocational Rehabilitation (VR)

Most simple explanation is they had a surplus and they continued to spend at that level.

The Commissioner of the Department of Ed has decided to move to an order of selection. This means you need to meet certain criteria and those “most in need” are served first and then others are served as time and money is available. Once an order of selection is put into place it is hard to come out of it. Right now, no one new is being served. If they did not have a plan they will not be served. What does most in need mean? Three categories – most significant disability, significant disability, less significant disability.

VR is still taking applications; however this is not the present experience that some families are reporting. VR is asking for patience as they move toward the process.

Families are calling and being told there is no funding for services. Message to family’s is they need to be to asking for an application. They are asking for an application not funding.

The commissioner has agreed to bring together a joint task force to come up with a plan. There are glaring gaps in this task force however this group has 6 weeks to come up with a plan and determine funding sources. There was a meeting with the Governor it was a solution-based meeting.

The Quality Council could bring a group together to look at this issue.

Voc Rehab has been moved to order of selection, federal law requires approval to move to order of selection and they have not received approval from the federal government yet.

Stephanie motioned to draft a letter to be send to commissioner of ed and us dept of education regarding our concerns in this process. Isadora seconded. All in favor. Jim abstained. Motion passed. Stephanie and Sarah will draft the letter.

Legislative Update (*Sarah Aiken*)

Managed care is off the table however we will still need to keep an eye on this.

The DD system will be receiving 5.5 million dollars in additional funding, with this they anticipate serving 120 people off the waitlist.

For the June Meeting think about legislation we want the QC to look at in the next year. One idea would be staffing for this Council.

Community Bridges will be doing a thank you campaign over the summer.

Other Business

Please identify your quality council alternate seat and notify Jenn of this alternate with their contact information. Please note it is your responsibility to let your alternate know when they will need to attend in your place.

DRC has heard from families about budget reductions, and the DRC wants to be sure families know their rights and what the process is.

Could we have a new member overview for members. Sarah will do the orientation she will get a brief description to Jenn to do an RSVP.

Motion to adjourn by Sarah, Deb seconded. Motion pass, meeting adjourned.

PLEASE NOTE THE DATE AND LOCATION CHANGE: Next Meeting: Wednesday, June 20, 2018 from 10:00AM – 1:00PM at Community Bridges, 70 Pembroke Road, Concord NH

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DEVELOPMENTAL SERVICES QUALITY COUNCIL

AGENDA--- Minutes

Wednesday, March 21, 2018, 10AM – 1PM

NH Council on Developmental Disabilities 2-1/2 Beacon Street, Concord

Emily Manire, Kaarla Weston, Lisa Beaudoin, Karen Blake Mosman, Kenneth Ferreira, Isadora Rodriguez-Legendre, Stephanie Patrick, Jim Piet, John Richards, Johnathan Routhier, Mary St Jacques, Cathy Spinney, Sarah Aiken, Adrienne Evans
Members of Public – Melisa Nemeth - BDS , Jennifer Pineo - NHFV Administrative Support

Welcome & Introductions

- Approve January minutes

Quality Council March 2018

Approval of Jan mins Johnathan Motion Sarah second. 6 Abstention.

Sub-Committee Reports

Managed Care – *(Jonathan Routhier) – work suspended*

Domains – *Needs new Chair (not reporting)*

Transparency – *(Adrienne)*

Transparency- Sarah did the update. We will begin to develop a website starting with a 10-15 questionnaire for each area agency (will send you the list) This will provide agency specific information as well as general developmental service information. Cathy would like us too add 171aJohn- Should we add the average cost per person and the average pay rate for DSPs. Cathy families should know they have a choice of area agency. Sarah We would like to list individual agencies policies so families can compare the services and funding restrictions developed by each agency Lisa would like are agencies to publish their employment stats. John Richards- Will agency directors be willing to share this info, will it create competition. Jonathan thinks sharing info is always a risk but the csni board will likely willing to take the risk

Workforce Training – *(Lisa B) – No updates*

Rules Review & Recommendations – *(Stephanie)*

Sarah updating for rules committee-Committee looked at the 1001, They will give a 30 min update at the next meeting. 522 Aquired Brain Disorder rules There are a number of concerns Narrowing of eligibility Case management with out input of advisory council. Process of termination of services isn't clear. Positives Moving towred uniformity

SB553 workgroup update – *(Sarah Aiken)*

BDS Rules and Procedures – (Melissa Nemeth, BDS)

Review of where we are and what our process are.

Get the draft together and get it out to consumers and Quality Council 4-5 months prior to the rule expiring.

Once you enter formal rule making, there is a prescriptive rule making procedure that the legislative process.

Is there a list of this year and next year rules that expire? Yes Melissa will send them.

Corrective Action Plan update – (Karla, BDS);

We are under a corrective action plan with CMS. There are two things to comply with conflict free case management and vendor billing.

Jen Doyt is taking the lead as the new CFO on the vendor billing issue.

The next stakeholder meeting will take place in the two weeks.

HRSI is providing some TA to NH in this process. There are some trainings that will be happening with these TA to understand PDMS service options and look at some of the obstacles.

RFP is now called self-selection or provider selection. There is an RFP subcommittee that is looking at this as there was some concern from PPN that it was not a fair process. The committee is looking at minimum best practices to move forward with it.

BDS sent out a survey that was on all the providers on the HRST list and they only got 20 responses, but the 20 responses were thoughtful responses.

They feel they are at 50% compliance with conflict free case management. PDMS & IHS is excluded because they believe they are already in compliance.

50% that are receiving a waived service are already served by a vendor (vs the AA that many receive case management from). This is looking at basically residential and day services.

There are additional discussions with CMS to extend the time frame from January 2019

They did get the NCI data in draft form, comments from BDS are due back on Friday.

Once this is final report it will be shared with the committee.

NCI is the in-person interview based survey. The numbers for each region are randomly generated. The individual AA sample sizes are too small to be statistically meaningful.

It is however helpful to compare to other states.

Results of ABLE-NH Family Survey (Lisa B)

This report is not ready, the survey has been closed since December. 138 responses.

Lisa gave a brief overview of some of the responses.

The survey was distributed through GSIL, DDC, AA, CSNI, DRC on the ABLE website, PPN, the Leadership list serve

The results will be ready for the May Meeting she would like 20 minutes

Lisa will send the data points to Jenn to be included in the minutes

Update NH Quality Framework Grant (Mary)

IOD received a quality framework grant. OIG report on reviews they did MA, CT, ME on group homes and Medicaid information on injuries. Situations happening in group

homes were not being reported appropriately. Have had a phone call with ACL (administration for community living) and the OIG group that formed this report. We want to look at these indicators. NH has protections in place for the people that are supported. There are multiple layers of support and NH system of oversight is much stronger. When looking at these quality indicators NH is already doing them. Should look at Lakeview because that is a way that they system failed. Question on how many people in NH live in group homes – BDS does have the information and they can share that. Question about families being frustrated about housing and there is a push to move back to more group “institutional” settings. There are families across the state that are organizing around this. There is a difference between those that receive Medicaid and those that don’t and the rules that apply with Medicaid dollars. We need to be aware of what the choice is and if individuals want to live with their friends. Concern around this and how it influences public policy. Stephanie noted that all the proposals she has seen may start with private dollars but need public dollars to sustain. If anyone has feedback, please email Mary.

Review Strategic Planning proposals – (Cathy, Sarah); POSSIBLE VOTE

Who is paying for this? DDC, BDS, IOD and CSNI were going to contribute funds to pay for this.

John motion to remove the highest proposal (NO SECOND – MOTION DIED)

Discussion of proposals and people’s thoughts on them.

Would it be helpful to have the facilitators come in and talk for 15 minutes each?

Jenn to schedule this with the facilitators.

Legislative Update (Sarah Aiken)

HB1816 passed house today and move to the Senate. Sarah would like the QC to support the bill again and encouraged anyone that could to testify.

Sarah motioned to support HB 1816 especially the carve out KB Second. All in favor, Kaarla (BDS) abstained.

Tomorrow is crossover day. HB 590 that will specifically give the AA 1.15 million in general fund dollars. It is part of an appropriations bill.

Other bills they are looking at the family medical leave bill – the bill has been gutted and changed so much that the organization that was proposing it do not want it to pass.

553 – there is a document that the QC has been asked to sign. The document will essentially say we support 1816 and not the implementation plan under 553. This is a request from a 553 subcommittee. When this comes out Sarah will share.

There was discussion about the Stakeholder meeting. There is a public hearing that will take place next week at Hazen Drive.

Sarah will send the doc regarding the SB553 implementation plan to the group

Old/New

Other/Announcements/Public Comment

ABLE NH annual celebration is May 17th, Concord Randy Pierce will be doing the keynote and chapter leaders will give updates

ABLE NH Disability Diagnosis dialog conversation in Manchester March 31st

DRC is hiring communications specialist and institutional rights monitor both are part time positions.

DDC – Dave Oulette has resigned from his position – DDC may reorganize and will announce any positions that become available.

CSNI – Governor did a disability awareness proclamation – had a great turn out.

Motion to adjourn - Jo

Next Meeting: Wednesday, May 16, 2018 from 10:00AM – 1:00PM

**PLEASE NOTE AS OF NEXT MONTH OUR NEW MEETING LOCATION
WALKER BUILDING, ROOM 100, 21 S. FRUIT STREET, CONCORD, NH**

The Developmental Services Quality Council provides leadership for consistent, systemic Review and improvement of the developmental disability and acquired brain disorder Services provided within New Hampshire's developmental services system.

DEVELOPMENTAL SERVICES QUALITY COUNCIL

MINUTES Thursday, January 25, 2018, 1PM – 4PM

Institute on Disability Professional Development Center 54 Old Suncook Rd, Concord

(Meeting was rescheduled due to inclement weather)

Members In attendance: Kaarla Weston, Mary St Jacques, Jim Piet, Stephanie Patrick, Isadora Rodriguez, Deb Opramolla, Adrienne Evans, Sarah Aiken, Jonathan Routhier

Members of the Public: Heather Donnell, Lynne Ober,
Jennifer Pineo NH Family Voices – Admin Support

- Open Seat Status – Enhanced Family Care Provider (*Isadora*)
- Approve November minutes – motion to approve John, Jim Second. Kaarla abstained.

HB1434 presentation and discussion – (*Reps Ober and MacKay; Isadora*); Q&A

Rep Ober give an intro of what it takes to get a bill a start.

(Note the following acronyms used DDC = Council on Developmental Disabilities

HHS = Health and Human Services GCD=Governors Council On Disabilities)

Intent was not to change how to DDC works. Rep Ober got the bill and it changed a lot of stuff and she asked for it to be back to what she intended. There was some conversation on federal HHS because there is a federal law involved. More than 50% of the states have made this change. The changes say the ED say collaborate with the DDC Director to ensure that all state laws are followed. Commission shall be the designated state agency to provide technical support. The bill says it is consultation with the GDC to hire a director but voted on by DDC. This is because it is a state employee and not an independent employee. DDC Stays independent, no changes to the DDC and how they function. There has been some movement of groups together organizations that are the same. It is a simple small house keeping bill. (Reference to bills below)

Stephanie: Nonfederal share agency is only required if the Council is not the designated agency. The amount that each state gets is pretty much fixed. The amount of funds that the DDC would not be impacted by the state.

Isadora – This is not a change the DDC requested. DDC collaborates with the GCD on a number of projects. GCD does not have a requirement for IDD. GCD follows the ADA DDC follows the DD Act. Federal Legislation is not duplicative. DDC serves a very specific population. There is a concern that some of that independence and voice will be lost under a larger umbrella. A change in designated state agency is allowed, the role of the DSA is primarily financial (accept, track and pay bills as the DDC tells them as the work is required). This will add another layer in the financial process. GDC is saying they will absorb the costs, but that could change, and it is not in the amendment. What if the GDC funding changes will they want the DDC funding? Current governor does support DD Community and what if there was a governor that did not support that and the GDC lost their funding what would happen? DSA is able to bill for 50% of admin fees, there is currently no plan for for GDC to bill for that, but no

guarantee in the future. DDC views it as a bureaucratic step backwards to when they were under another agency. Other DDC states are under HHS agencies because they are grandfathered not because it is a new change. It has been recommended that DDC not be under another agency that provides direct service. There is a question on if the CAP program is a direct service.

Jim – gave a background on his history with the DD Council. Jim was the chair back with the chair was appointed by the governor. At one of the hearings it was said that the DDC left \$225,000 on the table each year. This is incorrect because the state requires DDC to close books at end of June on the federal side we close our books at the end of September so we have to keep 3 months of funds, so we can pay our bills such as salary, rent, heat, paperwork and whatever is needed.

When Jim was chair he had to hire a new ED, and he put together a search committee and followed all the rules that personnel would use and during his tenure the DDC never had any fiscal problems. May have been nervous about fiscal issues but never had an issue.

Reb Ober – the bill does not change any of that, it was not intended to, and it will not.

Jim – is afraid of the image it will give to the community.

Jonathan – with the GDC providing the admin support as funding, would that allow the DDC to leverage to get more funds with a match for the DDC.

Stephanie – the answer is no, it could limit if the state was not in compliance with the DD Act

Stephanie – things that are deleted on page 2 that mirrors the federal law.

It says it would be pursuant to public law ### so that language was redundant.

Amendment does not say that federal law trumps state law.

Sarah This is always the case, so it was superfluous to add it.

Stephanie – there have been court battles when the state and federal laws differ

John – do you see any neg impact to the DDC?

Isadora: If GDC was to take over all of the admin – this would cause the DDC to loose a position of the person does this. It depends on how it is executed. If things in the future are not as good for the GDC that could have a potential impact.

Jon – does that create the opportunity to create another position or have the ability to repurpose the funds into other projects.

Deb – it takes away our immediate access to say we need something.

Jon was asking question to see if it would hamper the way the DD Council functions.

Adrienne does GDC have oversight or investigative and how does that work

Rep Ober – DDC will be the same.

Stephanie - What does in consultation mean

Rep Ober – that would be worked out with GDC and DDC with an MOU. DDC would be stand alone not trying to micro manage.

Step- it would make her more comfortable to have the fact that the independence of the DDC was written in the bill.

Jim – Why now? I have been doing this for 30 years. What is behind this?

The political environment is tense and I don't trust it, its my life and not yours. You can go home and do what ever you want but people like me need an independent voice. I do not see that happening.

References: Current Bill as of January 2018

http://www.gencourt.state.nh.us/bill_status/billText.aspx?sy=2018&id=1077&txtFormat=html

The amendment (That has NOT been voted on by the committee as of January 2018) is in Estudio

The federal DD act link is: <https://www.acl.gov/about-acl/authorizing-statutes/developmental-disabilities-assistance-and-bill-rights-act-2000>

Non-Public Session – (Sarah);

Sarah noted that this council cannot move into a non-public session, can only do this for certain reasons
91-A:3 Nonpublic Sessions. –

I. (a) Public bodies shall not meet in nonpublic session, except for one of the purposes set out in paragraph II. No session at which evidence, information, or testimony in any form is received shall be closed to the public, except as provided in paragraph II. No public body may enter nonpublic session, except pursuant to a motion properly made and seconded.

(b) Any motion to enter nonpublic session shall state on its face the specific exemption under paragraph II which is relied upon as foundation for the nonpublic session. The vote on any such motion shall be by roll call, and shall require the affirmative vote of the majority of members present.

(c) All discussions held and decisions made during nonpublic session shall be confined to the matters set out in the motion.

II. Only the following matters shall be considered or acted upon in nonpublic session:

(a) The dismissal, promotion, or compensation of any public employee or the disciplining of such employee, or the investigation of any charges against him or her, unless the employee affected (1) has a right to a meeting and (2) requests that the meeting be open, in which case the request shall be granted.

(b) The hiring of any person as a public employee.

(c) Matters which, if discussed in public, would likely affect adversely the reputation of any person, other than a member of the public body itself, unless such person requests an open meeting. This exemption shall extend to any application for assistance or tax abatement or waiver of a fee, fine, or other levy, if based on inability to pay or poverty of the applicant.

(d) Consideration of the acquisition, sale, or lease of real or personal property which, if discussed in public, would likely benefit a party or parties whose interests are adverse to those of the general community.

(e) Consideration or negotiation of pending claims or litigation which has been threatened in writing or filed by or against the public body or any subdivision thereof, or by or against any member thereof because of his or her membership in such public body, until the claim or litigation has been fully adjudicated or otherwise settled. Any application filed for tax abatement, pursuant to law, with anybody or board shall not constitute a threatened or filed litigation against any public body for the purposes of this subparagraph.

(f) Consideration of applications by the adult parole board under RSA 651-A.

(g) Consideration of security-related issues bearing on the immediate safety of security personnel or inmates at the county or state correctional facilities by county correctional superintendents or the commissioner of the department of corrections, or their designees.

(h) Consideration of applications by the business finance authority under RSA 162-A:7-10 and 162-A:13, where consideration of an application in public session would cause harm to the applicant or would inhibit full discussion of the application.

(i) Consideration of matters relating to the preparation for and the carrying out of emergency functions, including training to carry out such functions, developed by local or state safety officials that are directly intended to thwart a deliberate act that is intended to result in widespread or severe damage to property or widespread injury or loss of life.

(j) Consideration of confidential, commercial, or financial information that is exempt from public disclosure under RSA 91-A:5, IV in an adjudicative proceeding pursuant to RSA 541 or RSA 541-A.

(k) Consideration by a school board of entering into a student or pupil tuition contract authorized by RSA 194 or RSA 195-A, which, if discussed in public, would likely benefit a party or parties whose interests are adverse to those of the general public or the school district that is considering a contract, including any meeting between the school boards, or committees thereof, involved in the negotiations. A contract negotiated by a school board shall be made public prior to its consideration for approval by a school district, together with minutes of all meetings held in nonpublic session, any proposals or records related to the contract, and any proposal or records involving a school district that did not become a party to the contract, shall be made public. Approval of a contract by a school district shall occur only at a meeting open to the public at which, or after which, the public has had an opportunity to participate.

(l) Consideration of legal advice provided by legal counsel, either in writing or orally, to one or more members of the public body, even where legal counsel is not present.

III. Minutes of meetings in nonpublic session shall be kept and the record of all actions shall be promptly made available for public inspection, except as provided in this section. Minutes of such sessions shall record all actions in such a manner that the vote of each member is ascertained and recorded. Minutes and decisions reached in nonpublic session shall be publicly disclosed within 72 hours of the meeting, unless, by recorded vote of 2/3 of the members present taken in public session, it is determined that divulgence of the information likely would affect adversely the reputation of any person other than a member of the public body itself, or render the proposed action ineffective, or pertain to terrorism, more specifically, to matters relating to the preparation for and the carrying out of all emergency functions, developed by local or state safety officials that are directly intended to thwart a deliberate act that is intended to result in widespread or severe damage to property or

widespread injury or loss of life. This shall include training to carry out such functions. In the event of such circumstances, information may be withheld until, in the opinion of a majority of members, the aforesaid circumstances no longer apply.

Source. 1967, 251:1. 1969, 482:2. 1971, 327:3. 1977, 540:4. 1983, 184:1. 1986, 83:4. 1991, 217:3. 1992, 34:1, 2. 1993, 46:1; 335:16. 2002, 222:2, 3. 2004, 42:1. 2008, 303:4. 2010, 206:1, eff. June 22, 2010. 2015, 19:1; 49:1; 105:1, eff. Jan. 1, 2016; 270:2, eff. Sept. 1, 2015. 2016, 30:1, eff. Jan. 1, 2017; 280:1, eff. June 21, 2016.

Corrective Action Plan update – (Karla, BDS);

There has been a lot of collection of state wide data. There was a stakeholder meeting on January 22nd. NHFV did an independent survey and shared at the meeting

Concerns from vendors regarding RFPs – there is a subcommittee and Sandy hunt shared the minutes.

Looked at different areas – looked at service coordinator.

These numbers exclude PDMS, IHS, 525

99% of case management is done by AA, 1% use independent case management

The January 2019 date for compliance – have been in conversation with CMS to be able to extend this date. There was a survey that was sent out to vendors it also included questions about capacity. There were only 23 vendors that responded.

Rate setting – there has been discussions with other states to see what they have done and how they have done it. It is currently an open discussion.

Sarah: There is a question HRST and SIS if they will be tools in the tool box or become the tool box, may be important to hear at a future meeting about this and hear about this. There would probably not be any information until May.

Intensive Treatment Services (ITS) workgroup update – (Jonathan)

ITS programs that serve individuals that are eligible for waived services and also have a history of high risk behaviors including aggression towards others, fire setting, or highly sexualized behaviors. CSNI has been trying to improve the level and caliber of services to this group. There was an ITS summit in March 2017 to look at expanding the clinical capacity of services, to look at the funding mechanisms to ensure that agencies that provide this have a way to continue to operate if there is a vacancy, increased emphasis on trauma informed approach. There were work groups that came out of summit and the summit reconvened in the fall to update.

CNSI hired Marissa Berg as the ITS coordinate – role to drive uniformity across the AA and to helping with expanding the service options by doing outreach to organizations to bring in services that may have gaps in services. Looking at clients that have services out of state, many of them are in Florida. There is a follow up summit at the end of march to present their most recent updates.

The capacity development group has designed a pilot to study outcomes that will be documented by selected agencies. They will be submitting data and there may be some changes to the pilot based on the feedback of that data.

Question about the residential option and if other options are looked. It is really about the right service at the right time.

Question about how school age children and how these kids are served. There has been some pilot programs to look at this, but they are primarily focused on those that 21 and up.

ITS who is need at that level of service? – there is usually a level of violence that is included with the behaviors and are usually forensic.

Update on Recommendations for Rule HeM 1001 (*Stephanie*)

R&R committee met, and has another meeting scheduled in February.

Regulations around HeM 1001- is there time on the march agenda to allow BDS to present around the process for rules and regulations. To understand time frames for things like public input and how we can

Bi laws question on if non-quality council member can attend the sub-committees? – yes they can.

How the QC approves these and the process for thinking about drafts and how it is presented to the council. What happens if there is something that needs a quick response. How is this addressed? It would be helpful to have written process.

Sub-Committee Reports – no subcommittee reports

Legislative Update (*Sarah Aiken*)

HB1816 – would prohibit any group that is not currently in MC from being included in Managed Care.

AA is asking families to speak to only this section of the bill. There are other sections.

SB 567 workforce piece of legislation that could be utilized for training.

Next Meeting: Wednesday, March 21, 2018 from 10:00AM – 1:00PM

NH Council on Developmental Disabilities

2-1/2 Beacon Street, Concord